

TOWN OF CRESTED BUTTE SPECIAL EVENT APPLICATION



- A **complete** application must be submitted a **minimum** of thirty (30) days prior to your event. A **complete** application includes all **fees** and **deposits**.
- Incomplete applications will not be accepted.
- A \$100.00 late fee will be charged for late applications and no applications will be accepted less than ten (10) business days prior to an event.
- In addition to the application fee and a special event permit fee, a clean-up deposit will also be charged (see attached fee schedule).
- All special events require a minimum of \$1,000,000 in general commercial liability insurance naming the Town of Crested Butte as an additional insured (details are provided in this application).
- Additional application fees are required for a Special Event Liquor License.
- Please print clearly and **legibly**
- Block parties must comply with the Block Party Policy. Contact the Clerk's Office for more information.

Name of Event: _____

Date(s) of Event: _____

Name of Organization Holding the Event ("Permittee"): _____

Note: The permittee of an event must be the same as the named insured on the insurance binder.

Name of Event Organizer: _____

Phone: _____ Cell Phone: _____

E-Mail: _____ Fax Number: _____

Name of Assistant or Co-Organizer (if applicable): _____

Phone: _____ Cell Phone: _____ E-Mail: _____

Mailing Address of Organization Holding the Event: _____

Email Address of Organization: _____ Phone Number: _____

Detailed Event Description: Please attach an event schedule if applicable ☐ Event Schedule Attached

Event Location: *(Attach map showing location of event; Also attach 8 1/2" X 11" diagram detailing the event showing tents, vendors, security, toilets, tables, signage, fencing, booths, ingress and egress, stage etc):*

☐ Map Attached Showing Location of Event

☐ Diagram Attached Detailing Event

Event Time (start time of scheduled event to end time of scheduled event): _____

Total Time (including set-up, scheduled event, break-down & clean-up): _____

Do You Intend to Sell or Serve Alcohol? No_____ Yes_____

☐ **Special Event Liquor License Application is Attached with Appropriate Fees and Diagram**

☐ **Proof of Insurance is Attached** Yes No If No, Why Not:

Note: If there will be amplified sound during your event you will be required to abide by the rules in Ordinance No. 19, Series 2007 Section 6-4-5C. Upon completion and submission of this application the Town will provide you with an additional information packet outlining the regulations of Ordinance No. 19, Series 2007 and details on how to comply with the neighborhood notification process that you will be required to follow.

What recyclable products will be generated at the event?_____

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Describe Plan for Security (All major impact events, as well as events that receive a special event liquor license, are required to have a security plan):

Describe Plan for Parking: _____

Describe Plan for Portable Toilets and/or Restrooms: _____

Is Your Event Requesting Any Additional Services from the Town of Crested Butte (such as barricades, utility irrigation locates, traffic control, snow removal, electrical power, trash removal, additional police etc.)? No_____ Yes_____ If Yes, explain request for services in detail (attach additional page if necessary):

Will Your Event Require Any Road Closures? : No _____ Yes_____ If Yes, Explain in Detail Streets Closures and Times of Closures:

Will Your Event Impact Mt. Express Bus Service and/or Routes? No_____ Yes_____ If Yes, Explain Impact: _____

Will Your Event Affect Any Handicap Parking Spaces? No_____ Yes_____ If yes then you must work with the Marshal's Department to create a temporary handicap parking space/s for the duration of your event.

Describe Plan for Notifying Businesses and Neighbors Impacted by Your Event:

Does Your Event Include a Parade? No_____ Yes_____ If yes you must read and sign the following: I understand that if items are to be distributed during the parade (i.e. candy, beads, etceteras) individuals will do so exclusively by foot from along-side the vehicles/floats to minimize the likelihood of spectators running up to the vehicles/floats. I understand and agree that items will not be thrown from any vehicle/float. _____

Signature of Event Coordinator

Will You Be Selling Products (food, drink or merchandise) At Your Event? No_____ Yes_____ If Yes, You must Collect Sales Tax and Attach a Completed Town of Crested Butte Sales Tax License Application. ☐Town of Crested Butte Sales Tax Application is Attached.

If Approved Would You Like Town Staff To Post The Event On The Gunnison-Crested Butte Online Community Calendar? No _____ Yes _____ **If yes please write two sentences below describing the event in the exact wording it will appear on the calendar:** _____

Contact Name & Phone Number for the Calendar: _____

Event Fee for the Calendar: _____

Additional Applicant Comments: _____

Please Review Carefully:

In consideration for being permitted by the Town to engage in the permitted event, the Permittee, its heirs, successors, executors, assigns, transferees, employees, officers, directors, members, managers, representatives, contractors, subcontractors, agents, assigns, guests and invitees (collectively, the "Releasor/Idemnitor") hereby acknowledge and agree to the following: (i) Releasor/Idemnitor assume all risk of injury, loss or damage to Releasor/Idemnitor, any of them, arising out of or in any way related to the permitted event, whether or not caused by the act or omission, negligence or other fault of the Town, or by any other cause; (ii) Releasor/Idemnitor waive and release the Town from any and all claims, demands and actions for injury, loss or damage arising out of or in any way related to the permitted event, whether or not caused by the act or omission, negligence or other fault of the Town, or by any other cause; (iii) Releasor/Idemnitor agree to defend, indemnify and hold harmless the Town from and against any and all liability, claims, damages and demands, including any third party claim asserted against the Town, on account of injury, loss or damage, including, without limitation, claims arising from bodily injury, personal injury, sickness, disease, death, property loss or damage, or any other loss of any kind whatsoever, arising out of or in any way related to the permitted use, whether or not caused by the act or omission, negligence or other fault of the Town, or by any other cause. For purposes hereof, the term "Town" shall include, individually and collectively, its officers, employees, agents, insurers, insurance pools, contractors and subcontractors. By signing this Special Event Application, the Permittee acknowledges and agrees that this assumption of risk, waiver and indemnity extends to all acts, omissions, negligence or other fault of the Town and that said assumption of risk, waiver and indemnity is intended to be as broad and inclusive as is permitted by the laws of the State of Colorado. In any portion hereof is held invalid, it is further agreed that the balance shall, notwithstanding such invalidity, continue in full legal force and effect.

The undersigned Permittee certifies that all the statements and answers to the above questions are true without any reservations or evasions. The undersigned also understands that the Town of Crested Butte reserves the right to require payment for additional services for major impact events

Print Name Clearly / Signature of Applicant (Permittee)

Date

Application is Approved: _____

Eileen Hughes, Town Clerk

SPECIAL EVENT SALES TAX LICENSE APPLICATION

NAME OF BUSINESS: _____

CONTACT PERSON: _____

PHONE: _____ FAX: _____

EMAIL: _____

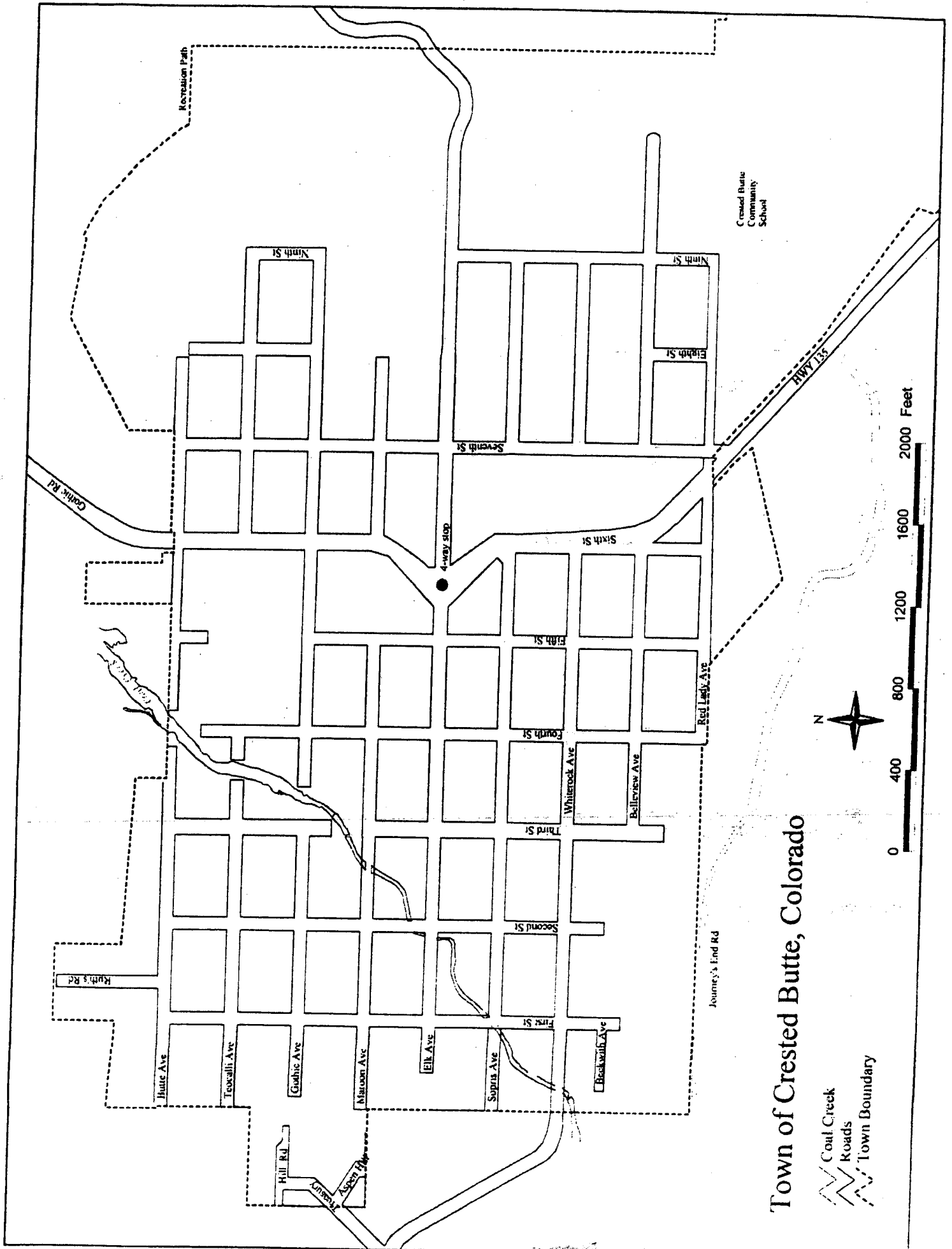
MAILING ADDRESS: _____
(Street, City, State, Zip)

BUSINESS LOCATION: _____
(Street, City, State, Zip)

NAME & DATE OF EVENT: _____

SIGNATURE: _____ DATE: _____

PLEASE RETURN THIS FORM TO:
TOWN OF CRESTED BUTTE
PO BOX 39
CRESTED BUTTE CO 81224
TELEPHONE 970-349-5338, FAX 970-349-6626



Town of Crested Butte, Colorado

- Coal Creek
- Roads
- Town Boundary



0 400 800 1200 1600 2000 Feet